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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 09/978,270 10/15/2001 PAT 6,700,957  
 which is a CIP of 09/206,716 12/07/1998 PAT 6,298,122

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **\*\* SMALL ENTITY \*\***  
**\*\* 05/13/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
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Verified and Acknowledged  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

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TITLE  
 Caller ID system with retransmitted caller ID information

FILING FEE  RECEIVED 585	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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